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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket	No. 15270J-004729US
First Inventor	Schenk, Dale B.
Title	PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE
Express Mail Lat	pel No. EV 433 231 586 US

nly for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	15270J-004729US
First Inventor	Schenk, Dale B.
Title	PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE
Express Mail Label No.	EV 433 231 586 US
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A	PPLICATION EL	EMENTS	ADDE	RESS TO)	Commissi	Patent Application oner for Patents	336.	
See MPEP chapter 600 concerning utility patent application contents.			AUUN			P.O. Box 14 Alexandria,		7	
1. Fee Trans (Submit and 2. Applicant See 37 CF 3. Specificati (preferred a - Descriptive - Cross Refe - Statement - Reference or a compu - Backgroun - Brief Sumr	8. Nucl (<i>if ap</i> a.	ADDRESS TO Commissioner for Patents P.O. Box 1450 Rexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper number of pages 3 (included in the instant specification) c. Statement verifying identity of above pages							
- Brief Desc - Detailed D	ription of the Drawings (ii escription	filed)		(see item 17 below) ACCOMPANYING APPLICATIONS PARTS					
- Claim(s) - Abstract of	the Disclosure	otal Sheets 13	9. 🗌 10. 🔲	9. Assignment Papers (cover sheet & document(s))					
5. Oath or Declara		otal Pages 2]	11. 🗆	English Tr	ansla	ation Docu	ment (if applicable)		
a. ☐ Newly e b. ☑ Copy fr (for a co									
Signed	statement attached dele	eting inventor(s)	13.	Preliminar	-		(MDED 500)		
namer 1.63(d 1.63(d 6. 🖾 Application (2 pp)	14. 🖂 15. 🗆 16. 🗆 17. 🖂	(Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent							
	PPLICATION, check ap				n belo	w and in th	e first sentence of the		
□ Continuation Prior application info For CONTINUATION Conder Box 5b, is cons	specification following the title, or in an Application Data Sheet under 37 CFR 1.76:								
☑ Customer Numb	□ Currespondence address below								
Name									
Address									
City		State			Zip	Code		-	
Country						·			
Name (Print/Type)	Rosemarie	. Celli	Registratio	n No. (Attorn	ney/A	gent)	42,397		
Signature	Signature / Oslmane					Date	March 31, 2004		



TOTAL AMOUNT OF PAYMENT

FEE TRANSMITTAL for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27 Complete if Known Application Number Unassigned Filing Date Herewith First Named Inventor Schenk, Dale B. Examiner Name Unassigned

Art Unit

Attorney Docket No.

2788

Unassigned

15270J-004729US

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METHOD OF PAYMENT (check all that apply)							FEE CA	ALCULATION (continued)		
Check Credit Card Money Order Other None			3. ADD	ITIONAL I	FEES 					
Deposit Accou	in <u>t:</u>			_	Large	Entity	Small	Entity	-	
Deposit Account 20-1430		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid			
Number	- " ' ' '				1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit		·		_ _	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Account Name	Townsen	d and Townsen	d and Crew LLP		1053	130	1053	130	Non-English specification	
The Director is au		(abaak all that and			1812	2,520	1812	2,520	For filing a request for reexamination	
Charge fee(s)		· <u> </u>	y overpayments		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge any ad	ditional fee(s)	or any underpaym	ent of fee(s)		1805	1,840*	1805	1,840°	Requesting publication of SIR after Examiner action	
		w, except for the	iling fee		1251	110	2251	55	Extension for reply within first month	
to the above-identif					1251	420	2251	210	Extension for reply within second month	
	FEI	CALCULATI	ON		1232	420	2252	210	Extension for reply within second month	
1. BASIC FILE					1253	950	2253	475	Extension for reply within third month	
	nall Entity	_			1254	1,480	2254	740	Extension for reply within fourth month	
Fee Fee Fe		Fee Description	Fee Pa	id						
	ode (\$) 101 385	Litility filing for	770	 1	1255	2,010	2255	1,005	Extension for reply within fifth month	
	001 365	Utility filing fee Design filing fee	770		1401	330	2401	165	Notice of Appeal	
	03 265	Plant filing fee			1402	330	2402	165	Filing a brief in support of an appeal	
	03 205	Reissue filing fee	,		1403	290	2403	145	Request for oral hearing	
	005 80	Provisional filing			1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	CURTO		(6)770		1452	110	2452	55	Petition to revive – unavoidable	
	SUBTO	TAL (1)	(\$)770		1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLA	IM FEES F	OR UTILITY A	ND REISSUE		1501	1,330	2501	665	Utility issue fee (or reissue)	
		Fe	e from		1502	480	2502	240	Design issue fee	
·	E		elow Fee Pai	d	1503	640	2503	320	Plant issue fee	
Total Claims 116	-20** =	96 🗶 \$18	= \$1,728		1460	130	1460	130	Petitions to the Commissioner	
Independent	₃		<u> </u>	╡	1807	50	1807	50	Petitions related to provisional applications	
Claims 2	3 = [0 7586	= \$0		1806	180	1806	180	Submission of Information Disclosure	
Multiple Dependent1		×	= 290	İ	1:				Stmt	<u> </u>
	Small Entity				8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Code (\$)	Fee Fe Code (\$)) Fee Des	cription		1809	770	2809	385	Filing a submission after final rejection	
1202 18			n excess of 20		1810	770	2810	385	(37 CFR § 1.129(a)) For each additional invention to be	
1201 86 1203 290	2201 4 2203 14	· · · · · · · · · · · · · · · · · · ·	dent claims in excess o		1,0,0	,,,	2010	303	examined (37 CFR § 1.129(b))	
1203 290		.3 ** Reiss	dependent claim, if not ue independent claims	paid	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18	2205	q ** Reiss	riginal patent ue claims in excess of 2 ver original patent	0	1802	900	1802	900	Request for expedited examination of a design application	
and over original patent SUBTOTAL (2) (\$)2788					Other fe	e (specify)	·		V PF (***)	
SUBTOTAL (2) (\$)2788 **or number previously paid, if greater; For Reissues, see above										
or manuscriptorously policy, it greater, if or inclusives, see above				*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						

SUBMITTED BY				C	omplete (if applicable)
Name (Print/Type)	Rosemagie L. Celli	Registration No. (Attorney/Agent)	42,397,	Telephone	650-326-2400
Signature	1 osen	rarie L. C	elli	Date	March 31, 2004